

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER 11-cv-691
DEFENDANT Steven Donziger	TYPE OF PROCESS Order to Show Cause

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT Steven Donziger
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 245 West 104th Street, Apt. 7D, New York, NY 10025

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
The Honorable Lewis A. Kaplan Daniel Patrick Moynihan United States Courthouse 500 Pearl St. New York, NY 10007	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold	DISTRICT COURT OF N.Y. S.D. OF N.Y. 29 AUG - 6 2019	Telephone Number	Date
Signature of Attorney other Originator requesting service on behalf of: <i>Lewis Kaplan</i>		PLAINTIFF <input checked="" type="checkbox"/>	212-805-0217 7/30/19
		DEFENDANT <input type="checkbox"/>	

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process PI	District of Origin No. 054	District to Serve No. 054	Signature of Authorized USMS Deputy or Clerk <i>QJB</i>	Date 7/31/19
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) <i>Laura Miller - wife</i>	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 7/31/19 Time 2:34 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
Signature of U.S. Marshal or Deputy <i>QJB</i>	

Service Fee \$130.00	Total Mileage Charges including endeavors \$21.11	Forwarding Fee	Total Charges \$151.11	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:

PRINT 5 COPIES: 1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*. To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

11-691-2 ✓